

Delaware Health and Social Services
Medical Care Advisory Committee (MCAC)
September 11, 2013 Meeting Minutes

Date: September 11, 2013 Place: Easter Seals 61 Corporate Circle New Castle, DE 19720 Time: 9:00 AM – 11:00 AM Presiding: Chairman Richard Cherrin		Members Present: Jim Lafferty, Judith Chaconas, Calvin Freedman, Lynn Robinson, Lisa Shieffert, Richard Cherrin, Dr. Glen Goleburn, DMD, Kris Bennett, Dr. Leonard Nitkowski, M.D., Yrene Waldron, Dr. Julia Pillsbury, D.O. Guests: Marie Nonnenmacher, Kris Bryerton, Gwen Cleary, Sara Martin, Linda Hampton, Nadene Chance, Kim Marsh, Allison Davenport Members Absent: Thomas Barlow, Penny Chelucci, Brandy Niezgoda, Ann Phillips, Olga Ramirez Staff Present: Dave Michalik, Steve Groff, Cindy Denemark, Michelle Amadio, Dr. Anthony Brazen D.O., Greg Roane, Karen Parker-Bender Staff Excused: Fury Fecundo, Jill Rogers, Kay Wasno, Glyne Williams, Lisa Zimmerman	
TOPIC FOR DISCUSSION	DISCUSSION / ISSUE	ACTIONS	FOLLOW UP RESPONSIBILITY
Call to Order: <i>Chairman Richard Cherrin</i>	Chairman Cherrin greeted everyone and called the meeting to order at 9:07 AM.		
Approval of Minutes: <i>Chairman Cherrin</i>	<p>Chairman Cherrin called for any additions, alterations or corrections to the June 12, 2013 minutes. Being none, Ms. Waldron motioned to accept the Minutes as recorded. Mr. Freedman seconded the motion. Motion carried.</p> <p>Due to time constraints, Chairman Cherrin moved the review of the MCAC By-laws to the next meeting.</p> <p>Director Groff introduced Michelle Amadio, who is replacing Crystal English as Project Director of the Health Insurance Marketplace. Director Groff praised Ms. Amadio for how quickly she jumped in and the great job she is doing.</p>		

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<p><u>New Business</u> Amendment / Renewal to the DDDS HCBS Waiver <i>Marie Nonnenmacher</i></p>	<p>Ms. Nonnenmacher, Deputy Director in the Division of Development Disabilities Services (DDDS) introduced herself.</p> <p>Ms. Nonnenmacher is in attendance today to present an amendment to the Home and Community Based Services Waiver (HCBS) Waiver for persons with intellectual and developmental disabilities. The Amendment (attachment #1) is supposed to become effective October 1st of this year.</p> <p>Changes proposed to the waiver are to add group supported employment as a waiver service. Previously, we had a service called supported employment, meaning a single job coach for a single person. Over time, we have seen the need to acknowledge that some people need/want to work in groups supported by a single job coach. Service criteria, provider qualifications and reimbursement methodology are specified in the waiver application. Technical correction was also made for billable unit from 1 hour to a 15 minute unit. Case managers are required to have a face-to-face meeting with a client quarterly; one meeting being in the participant's home and one must occur where the client is receiving waiver service.</p> <p>A brief question and answer period ensued.</p> <p>Home and Community Based Waivers are initially approved for a 3 year period and can be renewed for 5 year periods thereafter. We are currently in our 6th renewal of this waiver; it expires in June of 2014. The protocol per CMS is to submit a renewal application to them no later than 90 days prior to the effective waiver. We plan on submitting a draft renewal application in December that will highlight all the changes we plan on making. There are several services we are planning on adding.</p> <p>An extensive question and answer period followed.</p> <p>The MCAC gave unequivocal support to this waiver.</p>		
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Pathways to Employment <i>Director Groff</i>	<p>Director Groff reported:</p> <p>Governor Markell, as Chairman of the National Governor’s Association (NGA), has highlighted employment of individuals with disabilities. The NGA recently released a report called “A Better Bottom Line” focusing on employing people with disabilities. Also, the state passed legislation last year called the “Employment First Act.” We are looking at ways we can put policies into practice and how the Medicaid program can support employment and career development for individuals with disabilities. Two goals of the program are to:</p> <ol style="list-style-type: none">1. prepare youth with disabilities for careers that use their full potential and2. to make use of limited resources to advance employment opportunities. <p>The 1915i state plan amendment is a mechanism that allows states to offer home and community based services that in the past would have required a waiver. We have been working with the Division of Developmental Disabilities Services (DDDS), the Division for the Visually Impaired (DVI), the Division of Services for Aging and Adults with Physical Disabilities (DSAAPD), the Division of Substance Abuse and Mental Health (DSAMH), the Division of Vocational Rehabilitation (DVR) and the Department of Education (DOE) to develop a cross-disabilities program using 1915i authorities. We have developed a concept paper that will be ready for distribution shortly; the program is called Pathways to Employment (attachment 2). It will provide supports to not only career planning and job placement but also supported employment both individual and small group. Beyond that, we want to assist career development because there is a concern that individuals with disabilities quite often rely on the Medicaid program to</p>		

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<p>Pathways to Employment (Cont'd) <i>Director Groff</i></p>	<p>provide the supports that are needed, which is quite expensive and not available through commercial insurance.</p> <p>A discussion and question and answer period regarding Director Groff's report resulted.</p>		
<p>Old Business</p> <p>Director's Update <i>Director Groff</i></p>	<p>Director Groff reported:</p> <ul style="list-style-type: none"> • We are less than 30 days from open enrollment for the Federal Healthcare Marketplace; we've made a lot of progress and are as ready as we can be to go. We continue to see updated guidance even in these last few weeks and anticipate we will have some glitches and bumps. • Transformation of the Medicaid program is taking place at the same time. Our eligibility guidelines are being completely transformed. It is a major shift for our workers and for our systems. The Director recognized Dave Michalik and his staff for the work they have done with policy writing and technical assistance. Mr. Michalik cited Sharon Summers, the State Plan Administrator; Jill Williams, Eligibility Administrator; Lenore Miller, Provider Policy Administrator; and Marilyn Brill, Administrative Assistant for the excellent job done. • Beginning January, Medicaid will expand eligibility to all adults below 138% federal poverty level (FPL). Currently, our eligibility is at 100% of the FPL. Delaware qualifies as an expansion state, one of only 12 states because we had expanded eligibility before we were required to. 		

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<p>DSHP Update <i>Director Groff</i></p>	<p>Director Groff reported that the 1115 Waiver Renewal was submitted to CMS. Almost all states have to renew or amend their 1115 Waivers to accommodate the changes from the ACA. We received informal feedback that CMS didn't see any issues. We've received the first draft of our terms and conditions and we are expecting it to go through fairly smoothly. Changes in the waiver include:</p> <ul style="list-style-type: none"> ○ Development of the federally-mandated Alternative Benefit Plan (ABP) for the newly eligible group. ○ Coverage from the first day of the month of application for all eligibility groups. . ○ In the subset of the current CHIP population there are some children with incomes between 100% and 133% of the FPL who will now become eligible for Medicaid. The important distinction that has for those children is that it will give them eligibility for non-emergency transportation services and will eliminate the premium required for those children. All the children above 133% up to 200% will remain CHIP. ○ Elimination of the family planning only. Women between 100% and 138% of FPL will now qualify for full Medicaid coverage, which is a much better coverage. Women with incomes above 138% of FPL can purchase full coverage through the Marketplace. 		
<p>Pharmacy Update <i>Ms. Denemark</i></p>	<p>Ms. Denemark reported:</p> <ul style="list-style-type: none"> ● The DUR annual report was sent to CMS. Delaware was one of several states recognized for innovation. They acknowledged the work we've done in opioids, pain management and also the work we've done in adult populations. Other states have already reached out to us for more information. ● With all the attention given to opioid use this year is the treatment given to dependents. We continue to work with DSAMH to use their expertise to make sure access and appropriate treatment is there. 		

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	<p>There is also a new sub-committee; the GAC (Governor's Advisory Committee), working on exactly these problems because it's not just a Medicaid population issue, it's a state wide issue.</p> <ul style="list-style-type: none"> • An extensive conversation followed discussing pharmaceuticals, mental health and lack of facilities for rehabilitation. 		
<p>Health Insurance Marketplace Update <i>Michelle Amadio</i></p>	<p>Ms. Amadio reported:</p> <ul style="list-style-type: none"> • There are 90,000 Delawareans without health insurance. During the first enrollment period which goes from October 1st to March of next year, we are hoping to enroll 35,000 new people in the Marketplace and an additional 30,000 in the Medicaid program. • On the Marketplace, three insurance carriers have submitted plans to be reviewed by the State of Delaware and CMS to be sold on the Marketplace. Delaware have approved the carrier's plans; we are awaiting certification from CMS. • Each one of the 3 carriers has at least 3 plans to be sold on the Marketplace: The Gold Plan, The Silver Plan and the Bronze Plan. They are associated with costs, out of pocket costs, premiums and level of coverage. All of these plans meet the essential health benefits. The rates will not be known until we get through the certification from CMS. • Customer Assistance is our biggest push right now; we have 4 organizations that have been contracted by the State of Delaware to provide in person assistance or, Marketplace Guides. These are certified individuals that go through a full training and verification process. They have 2 online training courses; one state specific and one federal government, have a criminal background check, both state and federal. We are hopeful that by October 1st we will have the full cadre. • The four groups (Westside Health, Delmarva Foundation, Brandywine 		

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<p>Health Insurance Marketplace Update (Cont'd) <i>Michelle Amadio</i></p>	<p>Women's Health Center and Christiana Care) are looking at their deployment strategy; they are busy putting information throughout the communities.</p> <ul style="list-style-type: none"> • We are also working with the business community; Chambers, Small Business Alliance and others to see how we are going to promote and sell SHOP. SHOP is the place small business can go to purchase group insurance. It is not necessary for businesses to do that until next year, but it is available now. • We are working on the next phase now. Our sister state agencies have already put up notices; we will be working closely with them over the next few months. You will be seeing commercials, billboards, handouts, etc. • If you haven't looked at our website yet, I would urge you to do so. www.choosehealthde.com . It has 3 sections to explore. • Director Groff pointed out that 4 stand-alone dental providers were offering their services on the website as well. • We are also looking for a way to reach out to the provider community. • There will be tax credits available in two different categories to those who qualify between 100% and 400 % of the poverty level. There is an advanced payment tax credit that actually gets prepaid to the insurers that makes your payment go down. The second tier is a cost sharing deduction which is available to consumers between 100% and 250% of the poverty level to make it even a more affordable. 		
<p>Policy Update <i>Dave Michalik</i></p>	<ul style="list-style-type: none"> • Results of the PCP rate approved by CMS: 646 physicians enrolled with us for the increase. • There have been 22 Medicaid State Plan Amendments submitted to CMS and 21 additional CHIP State Plans submitted. Those were submitted by the end of August 2013. There may be changes that need to be made and conditional approval will likely be issued by CMS. 		

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Public Comment Adjournment <i>Chairman Cherrin</i>	<ul style="list-style-type: none">• Dr. Pillsbury suggested an interim meeting or a series of conference calls between this meeting and the December meeting as there was some concern about getting behind on information.• There were no public comments made.• Being no further business, Chairman Cherrin adjourned the meeting at 10:56 AM.		
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Respectfully submitted,

Rebecca Gallagher
Rebecca Gallagher, Recorder

Date Approved

Richard Cherrin, Chairman